PTO/SB/06 (07-06)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/081,229			ing Date 25/2002	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
П	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)
	SEARCH FEE	JT (C))	N/A		N/A		N/A		1	N/A	i e
F	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), ( FAL CLAIMS	(p) 10	minus 20 =				x \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ł	x s =			x s =	
	CFR 1.16(h))  APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	specificates of paper 50 (\$125 ional 50 s	thereof. See	ĺ						
┢	35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))								ł	<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ł	TOTAL	
APPLICATION AS AMENDED – PART II									,	101742	
	(Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY			
AMENDMENT	11/18/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	• 21	Minus	·· 27	= 0	1	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 4	Minus	•••5	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.1601)		Minus	**	=	1	x \$ =		OR	x s =	
	Independent (37 CFR 1,16(h))	*	Minus	***	:	1	x \$ =		OR	x s =	
Ä.	Application Size Fee (37 CFR 1.16(s))					]			]		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.											

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